

03-27-01

A

UTILITY  
PATENT APPLICATION  
TRANSMITTAL

Attorney Docket No.

CRNG.010

Total Pages

3

Case No.: SP01-024

First Named Inventor or Application Identifier | Antoniadou et al

Title | Performance Optimizer for Transmission Systems

Express Mail Label No.

EL689102716US

Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

## ADDRESS TO:

1. ☒ \* Fee Transmittal Form  
(Submit an original and a duplicate for fee processing)
2. ☒ Specification [Total Pages] 16  
(preferred arrangement set forth below)
- Descriptive title of the Invention
  - Cross References to Related Applications
  - Statement Regarding Fed sponsored R&D
  - Reference to Microfiche Appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description

3. ☒ Drawing(s) (35 U.S.C. § 113) [Total Sheets] 2

4. ☒ Oath or Declaration [Total Pages] 3

- a. ☒ Newly executed (original or copy)
- b. ☐ Copy from a prior application (37 C.F.R. § 1.63(d))  
(for continuation/divisional with Box 16 completed)
- i. ☐ DELETION OF INVENTOR(S)  
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

5. ☐ Microfiche Computer Program (Appendix)
6. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)
- a. ☐ Computer Readable Copy
  - b. ☐ Paper Copy (identical to computer copy)
  - c. ☐ Statement verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

7. ☒ Assignment Papers (cover sheet & document(s))
8. ☐ 37 C.F.R. § 3.73(b) Statement ☐ Power of Attorney  
(when there is an assignee)
9. ☐ English Translation Document (if applicable)
10. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☒ Copies of IDS Citations
11. ☐ Preliminary Amendment
12. ☒ Return Receipt Postcard (MPEP 503)  
(should be specifically itemized)
14. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
15. ☐ Other:

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: 08/

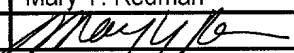
Prior application information: Examiner: «EXAMINER» Group / Art Unit: «GROUP\_ART\_UNIT»

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 17. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label

or ☐ Correspondence address below

|                   |   |                                   |              |          |                |
|-------------------|---|-----------------------------------|--------------|----------|----------------|
| NAME              | Susan Morse   |                                   |              |          |                |
| ADDRESS           | 12200 Sunrise Valley Drive, Suite 150   |                                   |              |          |                |
| CITY              | Reston  | STATE                             | VA           | ZIP CODE | 20191          |
| COUNTRY           | USA   | TELEPHONE                         | 703-715-0870 | FAX      | (703) 715-0877 |
| Name (Print/Type) | Mary Y. Redman  | Registration No. (Attorney/Agent) | 29,881       |          |                |
| Signature         |  |                                   | Date         | 3/26/01  |                |

# FEE TRANSMITTAL for FY 2000

**Complete if Known**

|                        |                                |
|------------------------|--------------------------------|
| Application Number     |                                |
| Filing Date            |                                |
| First Named Inventor   | Neophytos Antoniades           |
| Examiner Name          |                                |
| Group / Art Unit       |                                |
| Attorney Docket Number | CRNG.010<br>Case No.: SP01-024 |

**TOTAL AMOUNT OF PAYMENT (\$)** 1,300.00

## METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **03-3325**

Deposit Account Name **Corning Incorporated**

☒ Charge Any Additional Fees Required Under 37 C.F.R. §§ 1.16 and 1.17

2. ☐ Payment Enclosed:  
☐ Check ☐ Money Order ☐ Other

## FEE CALCULATION

### 1. BASIC FILING FEE

| Large Entity Fee Code | Entity Fee (\$) | Fee Description        | Fee Paid        |
|-----------------------|-----------------|------------------------|-----------------|
| 101                   | 710             | Utility filing fee     | 710             |
| 106                   | 320             | Design filing fee      |                 |
| 107                   | 490             | Plant filing fee       |                 |
| 108                   | 710             | Reissue filing fee     |                 |
| 114                   | 150             | Provisional filing fee |                 |
| <b>SUBTOTAL (1)</b>   |                 |                        | <b>(\$)</b> 710 |

### 2. EXTRA CLAIM FEE

| Total Claims       | Extra Claims | Fee from below | Fee Paid  |
|--------------------|--------------|----------------|-----------|
| 35                 | 20** = 15    | x 18 =         | 510       |
| Independent Claims | 4            | - 3** = 1      | x 80 = 80 |

Multiple Dependent =

\*\*or number previously paid, if greater; For Reissues, see below

| Large Entity Fee Code | Entity Fee (\$) | Fee Description  |
|-----------------------|-----------------|--|
| 103                   | 18              | Claims in excess of 20                                     |
| 102                   | 80              | Independent claims in excess of 3                          |
| 104                   | 270             | Multiple dependent claim, if not paid                      |
| 109                   | 80              | ** Reissue independent claims over original patent         |
| 110                   | 18              | ** Reissue claims in excess of 20 and over original patent |

**SUBTOTAL (2)** (\$) 590

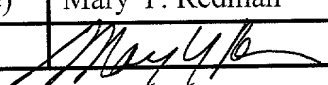
## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

| Large Entity Fee Code                    | Entity Fee (\$) | Fee Description  | Fee Paid                 |
|--|-----------------|--|--------------------------|
| 105                                      | 130             | Surcharge - late filing fee or oath  |                          |
| 127                                      | 50              | Surcharge - late provisional filing fee or cover sheet                             |                          |
| 139                                      | 130             | Non-English specification  |                          |
| 147                                      | 2,520           | For filing a request for reexamination   |                          |
| 112                                      | 920*            | Requesting publication of SIR prior to Examiner action                             |                          |
| 113                                      | 1,840           | Requesting publication of SIR after Examiner action                                |                          |
| 115                                      | 110             | Extension for reply within first month   |                          |
| 116                                      | 390             | Extension for reply within second month  |                          |
| 117                                      | 890             | Extension for reply within third month   |                          |
| 118                                      | 1,390           | Extension for reply within fourth month  |                          |
| 128                                      | 1,890           | Extension for reply within fifth month   |                          |
| 119                                      | 310             | Notice of Appeal   |                          |
| 120                                      | 310             | Filing a brief in support of an appeal   |                          |
| 121                                      | 270             | Request for oral hearing   |                          |
| 138                                      | 1,510           | Petition to institute a public use proceeding                                      |                          |
| 140                                      | 110             | Petition to revive - unavoidable   |                          |
| 141                                      | 1,240           | Petition to revive - unintentional   |                          |
| 142                                      | 1,240           | Utility issue fee (or reissue)   |                          |
| 143                                      | 440             | Design issue fee   |                          |
| 144                                      | 600             | Plant issue fee  |                          |
| 122                                      | 130             | Petitions to the Commissioner  |                          |
| 123                                      | 50              | Petitions related to provisional applications                                      |                          |
| 126                                      | 240             | Submission of Information Disclosure Stmt  |                          |
| 581                                      | 40              | Recording each patent assignment per property (times number of properties) _____ x |                          |
| 146                                      | 710             | Filing a submission after final rejection (37 C.F.R. § 1.129(a))                   |                          |
| 149                                      | 710             | For each additional invention to be examined (37 C.F.R. § 1.129(b))                |                          |
| Other fee (specify) _____                |                 |  |                          |
| Other fee (specify) _____                |                 |  |                          |
| <b>*Reduced by Basic Filing Fee Paid</b> |                 |  | <b>SUBTOTAL (3)</b> (\$) |

## SUBMITTED BY

## Completed (if applicable)

|                   |   |                                   |         |
|-------------------|---|-----------------------------------|---------|
| Name (Print/Type) | Mary Y. Redman  | Registration No. (Attorney/Agent) | 29,881  |
| Signature         |  | Date                              | 3/26/01 |